

EXHIBIT A

SCOPE OF WORK/WORK PLAN FORMAT

Requested Grant Funds in Fiscal Year 2012-13

Program/Project Summary: SLO Noor Clinic Laboratory/Diagnostic Testing

The SLO Noor Clinic Laboratory will continue to enable physicians to perform labs while patients are at the clinic. This allows for minimal follow-up and reduced operating costs. It fulfills the need for fast, accurate, and reliable test results to make critical patient care decisions. Also provide patients with Physician approved diagnostic testing as appropriate to assist Physicians determine patients' health status. And adding additional hours of operation and personnel will provide access to more patients.

Goal/Objective	Major Tasks (in order to achieve goal)	Timeline
Continue to provide in-house, accurate, reliable test results in minutes.	A. Provide refresher courses or new protocol training to existing Volunteer Physicians B. Train new Volunteer Physicians on I-Stat Equipment	A. As needed B. Ongoing
Reduce costs and increase efficiency associated with Labs	A. Purchase I-Stat supplies B. Provide patient labs on site	A. Ongoing B. Ongoing
	(Continued on next page)	
Facilitate providing appropriate patients with Physician recommended diagnostic testing not currently available on-site. (Ex: mammograms & colonoscopies)	A. Negotiate discounted rates with outside providers B. Begin diagnostic testing for most-in-need patients C. Based on patient needs, gradually expand testing.	A. January 2012 B. Feb. 2012; then ongoing C. July 2012; then ongoing
Increase both the clinic's capacity and Physicians' efficiency.	A. Increase walk-in clinic hours by 4 hrs. per week. B. Hire a part-time Nurse Practitioner	A. June 2012; then ongoing B. June 2012; then ongoing
Increase efficiency associated with Labs and patient screenings.	A. Purchase a 2 nd Piccolo Analyzer B. Purchase an EKG machine	A. October 2012 B. January 2013
Project Outputs		
- Continue to provide labs in-house, rather than sending them out to local hospitals and pay associated costs.		

- Provide 100 or more patients with diagnostic testing not currently available on-site at the clinic
- Increase number of patients seen monthly by 50 or more persons beginning June 2012

Data will be collected on:

- The number and type(s) of education given to patient/family seen at our clinic
- The number of referrals made to CMSP or other local programs
- The number of referrals sent to sub-specialist and what kind of specialist was needed
- And data will show medication assistance needed, the type of prescription (heart medication, diabetes medications, etc.)

Project Outputs

We will measure the effectiveness of our program with these goals in mind:

- 75% of our in-house lab testing/sampling costs will be lower than local “market rate.”
- 100 patients or more will be provided with diagnostic testing not currently available on-site at the clinic.
- Monthly patient count will increase by 50 or more per month beginning June 2012
- 60% of our patient base will not use ER for primary care
- 100% of our patient base will receive health education related to their clinic visit. For example: healthy living options, wellness programs, Diabetes management, etc.
- We will provide direction to the appropriate resources available in our community to help link patients to agencies that can ensure successful outcomes for our patients, such as insurance coverage under state and local programs, programs that assist with housing, food, prescriptions, drug & alcohol treatment, and care giving.
- When appropriate, patients will receive assistance with referral to sub-specialist.

Scope of Work/Work Plan – FY 2012-13

Practice Definition

The SLO Noor Clinic is insured and fully licensed. As a clinic providing acute, non-emergent care, the SLO Noor Clinic strictly adheres to the accepted and approved practice policies. Supervising physicians include all physicians volunteering at the SLO Noor Clinic. There is a list of physicians with qualifying license numbers and dates that are authorized to be supervising physicians volunteering at the SLO Noor Clinic.

Laboratory Testing/Sampling

The SLO Noor Clinic adheres to the Clinical Laboratory Improvement Amendments of 1988 (CLIA) for the performance of moderate complexity testing.

The laboratory has been in operation for three months now. As our patients are uninsured, nearly all have not had full physical exams for much longer than is typically advised. Also, as this has been a first visit to the SLO Noor Clinic, physicians **benefited from quick test**

results to determine a patient's true health status and advise the patient of a treatment plan if needed.

During October 14 through December 31 (minus days the clinic was closed for the holidays), we performed 225 lab tests. The five most commonly performed tests are: Comp Metabolic Panel (42), Basic Metabolic Panel (32), Urine Dipstick (25), Blood Glucose Strips (20), and TSH (18). We did a cost comparison of our costs versus a respected local diagnostic facility. **The cost efficiency of the SLO Noor Clinic lab is remarkable: our cost for the "Top 5" was \$901.60 compared to what would have been \$7,622.86 at the other location.** Projected over a 12-month period, the savings will be even more substantial.

Other labs performed on-site through December 31st include FSBS, Hemocult, Hepatic Function Panel, HgbA1c, Lipid Panel and Lipid Panel Plus, Liver Panel Plus, Renal Function Panel, WBC, Rapid Strep Test, Mono, and HGB. With the I-Stat equipment we have in place, we also have the capability to perform an even larger range of moderate complexity testing.

Diagnostic Testing

Before the clinic opened, it was difficult to precisely pinpoint what the average health profile, age, and sex of our patients would be. Now that our volunteer physicians have had the benefit of meeting several hundred clinic patients, we have a better understanding of our target population. What we are finding is that a frequent reason they wish to see a doctor is for aches or pains that would benefit from an X-ray or ultrasound to help the physician make a diagnosis and treat. Additionally, as a preventative health measure, when people reach certain age milestones, tests (like mammograms or colonoscopies) are strongly suggested to be scheduled annually, or at other recommended intervals. A large number of our patients to date fall in these age categories. However, because they are uninsured and do not have the financial means to pay for exams, they have postponed or skipped the tests. **As many problems are "silent" until they progress to more serious stages, early detection and treatment is highly preferable to the alternative.**

At this time the SLO Noor Clinic is not equipped to provide the types of diagnostic tests listed below. However, we have been talking with a number of people in San Luis Obispo and they are willing to provide these tests to our patients at their locations and charge the SLO Noor Clinic at discounted pricing. We think this is a good investment of funds that can produce "healthy dividends."

We cannot predict exact figures of the type and number of diagnostic tests that will be needed in 2012/13 because it will depend on the evaluation of the Volunteer Physicians of patients current health and history. However, the following list is the tests we would like to provide beginning February 2011. The list has been ranked according to which tests we *estimate* will be physician advised most frequently and *approximate* discounted rate costs for each test:

- #1 Mammograms – for women 40 and over: \$150 - \$270
- #2 X-Rays or abdominal ultrasounds: \$174
- #3 PSA Tests – can do these in-house or outsource at a discounted price: \$80
- #4 Colonoscopies – starting @ about age 50: \$2,758 (including 3 specimens)
- #5 Bone Density Tests – for women 50 and over: \$440

Increase the Walk-in Clinic Hours to 12 Per Week

As mentioned previously, we already have more patients seeking medical attention than the current Friday & Saturday afternoon walk-in clinic hours can accommodate. Beginning in June 2011, we would like to add 4 more hours per week. **This would mean we could see about 100 additional patients per month and further relieve hospital ERs from visits from uninsured persons.** We have enough Volunteer Physicians and other medical volunteers to do this. There would be no additional office rent charge. Additional patients would mean additional lab testing and this would increase those monthly costs by approximately 50%. On the other side of the coin, physicians have already discovered several patients with blood pressure readings so elevated that there was a high probability each was just days or weeks away from a serious stroke or heart attack. Treatment was begun immediately to avert what could have been a traumatic situation for the patient (and his/her family) that required (expensive) hospitalization or ER care.

Hire a Nurse Practitioner

In the first 3 months of operation, there have been 51 follow-up visits by patients. They all did return to the SLO Noor Clinic rather than visit a hospital ER. However, they were attended to by Volunteer Physicians. Many, if not most, of the patients could have been cared for by a Nurse Practitioner, and the Volunteer Physicians could focus on new patient exams. A Nurse Practitioner could also provide assistance to Volunteer Physicians on walk-in clinic days and manage any needed lab work on the other days. We would like to hire a Nurse Practitioner beginning June 2012. **Doing so, the clinic would still be 99% staffed by volunteers.**

Purchase Additional Equipment

By adding one Piccolo Analyzer machine to the laboratory, we **could double the amount of tests that can be done during a single shift.** As the number of patients seen per week increases, this would allow the lab to keep pace with Volunteer Physicians and continue to provide accurate and timely test results and lessen the probability of a backlog.

A second machine would also serve as a back-up to the other machine. This would allow the clinic to remain self-sufficient rather than sending out lab work and paying the associated (higher) costs.

Adding an EKG machine (with computer interface capability) to the equipment inventory would provide Volunteer Physicians with a very helpful diagnostic tool and **allow more extensive heart health testing to be done on-site** at the clinic.

Additional Services

It is anticipated that additional services offered at the SLO Noor Clinic such case management by social workers, a psychologist, and physical therapy will continue with no changes during 2012-2013.

In closing, we do intend to continue to offer patients and student interns a mutually beneficial and educational experience, and expose students early in their training to the nuances of providing quality patient care to a population with diverse and ever-changing health care needs.

Application - FY 2012-13
AMENDED PROGRAM BUDGET REQUEST FORM

For inclusion to the Signed Agreement
between the
County of San Luis Obispo
and the
SLO Noor Foundation
FY 2012-13
CBO/PHG Grant Funding

*As the County of San Luis Obispo has approved a grant in the amount of \$100,000
rather than the \$144,694 requested in the original application,
the SLO Noor Foundation respectfully submits this Amended Program Budget
to reflect a proposed redistribution of funds available.*

Submitted: September 7, 2012

Application - FY 2012-13

AMENDED PROGRAM BUDGET REQUEST FORM

As the County of San Luis Obispo has approved a grant in the amount of \$100,000 rather than the \$144,694 requested in the original application, we respectfully submit this Amended Program Budget to reflect SLO Noor Foundation's proposed redistribution of funds available.

	Project Expense	Grant Budget Requested	Other Funding Available* Amt. & source
I. PERSONNEL EXPENSES (associated with the proposed project)			
Office Manager – 40hrs/wk (\$3,440 mo.)	\$ 41,280		\$ 41,280 @
Clinic Coordinator – up to 25/hrs.wk (\$1,642/mo)	\$ 19,705		\$ 19,705 @
Nurse Practitioner – up to 25 hrs/wk. (\$64.50/hr)	\$ 64,151		\$ 64,151 @
Taxes & Benefits – included in annual figures			
Workers Comp Policy (\$60 mo)	\$ 720		\$ 720 @
Volunteer Medical Services (\$26,833/mo)	\$322,000		\$ 322,000 @
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Subtotal – Personnel Expenses	\$447,856	\$ 0	\$ 447,856
II. OPERATING EXPENSES (associated with the proposed project)			
Medical Diagnostics – (\$80 - \$4,600 per test)	\$134,448	\$ 72,448	\$ 40,000 NS
40 Mammograms – (Avg. \$210 ea = \$8,400)			\$ 6,000 NS
40 X-rays (Avg. \$174 ea = \$6,960)			\$ 16,000 NS
36 Colonoscopies (Avg. \$2,758 ea = \$99,288)			
38 PSAs (Avg. \$80 ea = \$3,040)			
10 CT Scan/Neck/Pelvis/Spine (\$1,216 ea=\$12,160)			
1 PET Scan (\$4,600 ea = \$4,600)			
Medical Supplies (Lab testing) (\$3,353/mo avg)	\$ 40,230	\$ 14,686	\$ 10,000 Secured
			\$ 15,544 NS
Small Medical Equip. - (\$440/mo)	\$ 5,280	\$ 280	\$ 5,000 NS
Hazardous Waste Disposal – (\$320/mo)	\$ 3,840		\$ 3,840 @
Capital Outlay (Permanent Lab Equip)	\$ 0	See final report for FY 2011/12 grant	Will seek other funding if needed
Piccolo Analyzer #2 (\$14,150 ea)			
EKC w/computer interface (\$5,000 ea)			
Rent – Clinic (\$1,885/mo)	\$ 22,620		\$ 22,620 @
Utilities/Phone/Internet/Alarm (\$430/mo)	\$ 5,160		\$ 5,160 @
Office Supplies (\$900/mo)	\$ 10,800		\$ 10,800 @
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Subtotal – Operating Expenses	\$222,378	\$ 87,414	\$ 134,964
VI. INDIRECT @ 10% OF PAID PERSONNEL	\$ 12,586	\$ 12,586	
Total Grant Project Expenses	\$682,820	\$ 100,000	\$ 582,820

*List in this column all agency funds available to support the project. Indicate with a "@" next to the

amount that are in-kind and a "NS" for those not yet secured.

AMENDED BUDGET NARRATIVE:

Request for Application – FY 2012-13

Personnel: The Subtotal for this category remains the same as the original application FY 2012/13, but we submit these line item modifications: Clinic Coordinator: Subsequent to submitting the FY 2012/13 grant application, the Noor Foundation Board approved switching a part-time Clinic Coordinator position from volunteer status to a paid position retroactive to February 2012. An exceptional lady who had volunteered 20+ hours weekly during the start-up phase and the initial months after the Clinic opened was hired. Along with the Office Manager, they lend continuity to the program and perform a large array of important administrative services. Most months the Clinic Coordinator will be paid for 20/hrs./wk, but an annual appropriation of \$19,705 (rather than a set monthly figure) gives the Board flexibility to increase hours during weeks with a larger than usual work load. Nurse Practitioner: As the organization is so new, the Board has been cautious and conservative so we do not exceed cash flow. With this in mind, one action taken was to postpone hiring a part-time Nurse Practitioner. However, to reduce the patient wait time for a medical appointment, this is still a priority as we look to the future, but rather than set a monthly budget for 2013, we are modifying the line item to \$64,151 for 2013. This gives the Board flexibility to start modestly with the number of work hours weekly and gradually build to 25 paid hours per week.

Note: Our volunteer personnel roster now also includes Dr. Pravir Vatsa, who was recently approved as the Clinic's Medical Director. We note that free clinic Medical Directors nationally are typically a paid position, so we are extremely appreciative that Dr. Vatsa is providing his services and expertise pro bono.

Operating Expenses:

No change from budget submitted in the original application FY 2012/2013 except for the following line items:

Medical Supplies: The subtotal for this item remains the same, but we submit this change: decrease budget request from County of SLO from \$25,544 to \$14,686 and increase the amount available from other sources to \$25,544. We have secured grants in the amount of \$5,000 each from the City of SLO and United Way that may be applied to this category. We also have additional grant applications submitted and currently in review.

Capital Outlay: Due to our conservative approach to expenditures in 2012 to date, there are sufficient funds remaining from the \$75,000 grant funding received in October 2011 from the County of SLO to purchase the desired Piccolo Analyzer and EKC w/computer interface in the fall of 2012 rather than waiting until 2013. We have requested permission to do that in our FY 2011/12 Final Report. Doing so would also help lower the overall "Grant Budget Requested" amount FY 2012/13 to more closely match the \$100,000 awarded. If permission is granted for our proposed plan for the carryover balance from the FY 2011/12 grant funding, we anticipate that our in-house lab should be in excellent shape to not require additional equipment purchases in 2013. However, if there is a need, we will seek funding from another source such as a charitable foundation.

Indirect: The indirect expense calculation is based on 10% of total cost of \$125,856 for the salaries/taxes/benefits for 3 paid employees. (Also see Personnel Expenses above).